PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further e indicated unless correcte maintenance fee notificat	d below or directed oth	ng the Patent, advance on herwise in Block 1, by (orders and notification of racial specifying a new corres	naintenance fees w spondence address;	ill be mail and/or (b)	ed to the current of indicating a separ	orrespondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
22434 BEYER WEAV P.O. BOX 70250 OAKLAND, CA		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/642,463	10/642,463 08/15/2003		Richard A. Gottscho		LAMIP141DI		2171	
FITLE OF INVENTION	SWITCHED UNIFOR	MITY CONTROL					_	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0		\$1700	09/05/2007	
EXAM	NER	ART UNIT	CLASS-SUBCLASS					
TUROCY, DAVID P		1762	438-714000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternative (2) the name of a single	te of a single firm (having as a member a attorney or agent) and the names of up to a patent attorneys or agents. If no name is				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Lam Research Corporation Fremont, CA								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government								
la. The following fee(s) a Issue Fee Description Fee (No. Advance Order - #	o small entity discount p	☐ A check is enclosed. ☐ Payment by credit care	A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500388 (enclose an extra copy of this form).					
a. Applicant claims	us (from status indicated SMALL ENTITY statu	s. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMAL	L ENTITY	status. See 37 CFF	. 1.27(g)(2).	
NOTE: The Issue Fee and nterest as shown by the re	Publication Fee (if requeecords of the United State	uired) will not be accepte tes Palent and Trademark	ed from anyone other than the Office.	ne applicant; a regist	tered attorn	ney or agent, or the	assignee or other party in	
Authorized Signature	Muhan		Date	Aug	gust 31, 20	07		
Typed or printed name	Michael Le		Registration No. 31,846					
This collection of informant application. Confidenti ubmitting the completed his form and/or suggestic	tion is required by 37 C ality is governed by 35 application form to the	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the	on is required to obtain or re 1.14. This collection is estive depending upon the indivi- depending upon the officer e Chief Information Officer	etain a benefit by the mated to take 12 m dual case. Any con r, U.S. Patent and T	e public whinutes to comments on rademark (nich is to file (and bomplete, including the amount of time Office, U.S. Depart	y the USPTO to process) gathering, preparing, and you require to complete ment of Commerce, P.O.	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, O.S. Fatent and Trademark Officer, O.S. Department of Commission, F.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.